

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

11/05/2003 WABRHAM1 00000069 231660 10699159

01 FC:1001 770.00 DA
02 FC:1202 1044.00 DA
03 FC:1201 688.00 DA

Adjustment date: 05/18/2004 HMOHAMM1
11/05/2003 WABRHAM1 00000069 231660 10699159
03 FC:1201 688.00 CR

05/18/2004 HMOHAMM1 00000006 231660 10699159

01 FC:1201 430.00 DA

PTO-1556
(5/87)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10699159

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	78	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	78 minus 20=	* 58
INDEPENDENT CLAIMS	8 minus 3 =	* 5
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY

TYPE

OTHER THAN

OR SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE
X\$ 9=		OR	770.00
X43=		OR	X\$18=
+145=		OR	1044.00
TOTAL		OR	X86=
			430.00
			+290=
			TOTAL 7244.00

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY

OR

OTHER THAN

OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=
X43=		OR	X86=
+145=		OR	+290=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE

ADDI-
TIONAL
FEE

RATE

ADDI-
TIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=
X43=		OR	X86=
+145=		OR	+290=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE

ADDI-
TIONAL
FEE

RATE

ADDI-
TIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=
X43=		OR	X86=
+145=		OR	+290=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.